



Bib Data Sheet



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APPlicants

XANDER VAN DER HEIJDEN, BREDA, NETHERLANDS;
ROBERT DEBLIER, HASSELT, BELGIUM;
CHIP BLANK, BREDA, NETHERLANDS;

**** CONTINUING DATA *******

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**** FOREIGN APPLICATIONS *******

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance
Verified and Acknowledged	Examiner's Signature _____ Initials _____
	STATE OR COUNTRY NETHERLANDS
	SHEETS DRAWING 3
	TOTAL CLAIMS 1
	INDEPENDENT CLAIMS 1

ADDRESS

000466

TITLE

METHOD AND APPARATUS FOR STRUCTURED COMMUNICATION

FILING FEE RECEIVED 1114	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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